

Hotel rooms for Optometry's Meeting™ disappearing fast

Optometry's Meeting™ 2006 in Las Vegas is on pace to set an attendance record.

Due to overwhelming response, the AOA/AOSA room block at the Mandalay Bay Resort and Casino, Optometry's Meeting™ headquarters hotel, has been fully booked.

Space is still available at the other two official hotels—Luxor Las Vegas and Excalibur.

Guests of Luxor Las Vegas are surrounded by desert palms and Egyptian-inspired architecture. Guests can dine, shop, and be entertained onsite. Luxor Las Vegas also offers 24-hour room service.

Luxor guests can choose from 10 unique dining experiences, relax by the pool or schedule a spa treatment in between Optometry's Meeting™ activities.

Award-winning Broadway shows, comedians, and musical groups make up the on-going entertainment at the Luxor. Guests can visit a replica of King Tut's Tomb at the King Tutankhamen Museum or experience a movie IMAX-style.

The royal treatment at Excalibur includes feasting at seven different restaurants, including the Tournament of Kings, a jousting dinner show. The hotel is affordable, and guests can enjoy 24-hour room service, two pools with water slides, a spa, the Fantasy Faire Midway, and shopping.

All selected hotels feature casinos offering games such as slots, electric and table games, poker, video poker, keno, baccarat, Asian games, and race and sports books.

The Mandalay Bay Resort and Casino, Luxor Las Vegas, and Excalibur hotels are all connected by complimentary tram service and indoor walkways, making the convention center located within Mandalay Bay easily accessible to guests at area hotels.

For more information, visit www.optometrys-meeting.com.

National Provider Identifier link on AOA Web site

AOA members can now apply for National Provider Identifier (NPI) numbers through a link on the AOA Web site (www.aoa.org).

Developed as nationally standardized form of identification for health care providers, NPI numbers are a key part of a government plan to encourage greater administrative efficiency in the nation's health care system.

Effective May 23, 2007, NPIs will be required on claim forms for most public and private health plans.

Optometrists should apply now for their NPI numbers, according to the AOA Advocacy Group.

Required under the Health Insurance Portability and Accountability Act (HIPAA) of 1996, the NPIs are 10-digit numeric identifiers (with nine numbers and a "check digit" in the tenth place) designed to replace the myriad identification numbers now assigned to health care providers by various public and private health insurers for use

on their claim forms.

The NPIs are specifically designed for use in a new standardized electronic claims format, known as the "standard transaction," which health plans and providers will be

the standard form of identification for health care providers on paper claims as well, meaning even health care providers who do not file claims electronically will probably have to obtain NPIs, the AOA

The NPI should greatly simplify health care administration for everyone involved, including health care providers, according to CMS.

required to adopt under HIPAA.

Under federal law, any provider who transmits health information electronically in connection with any of the standard transactions is required to obtain an NPI, even if the provider uses a business associate, such as a billing agency, to prepare transactions.

Although only required by the government program for electronic transactions, NPIs will essentially become

Advocacy Group notes.

"Health care providers" specifically include individual health care practitioners such as medical doctors, dentists and optometrists, as well as hospitals and larger health care providers, under the final rule issued by the U.S. Centers for Medicare and Medicaid Services (CMS) to implement the NPI program.

CMS, through a

see Identifier, page 8

Inside



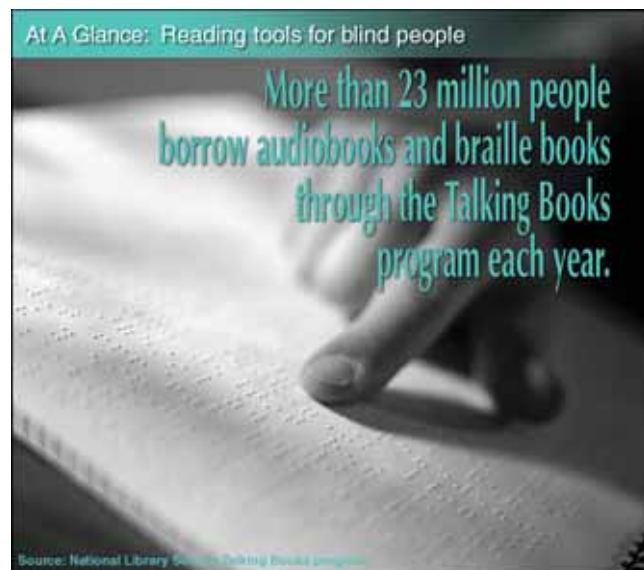
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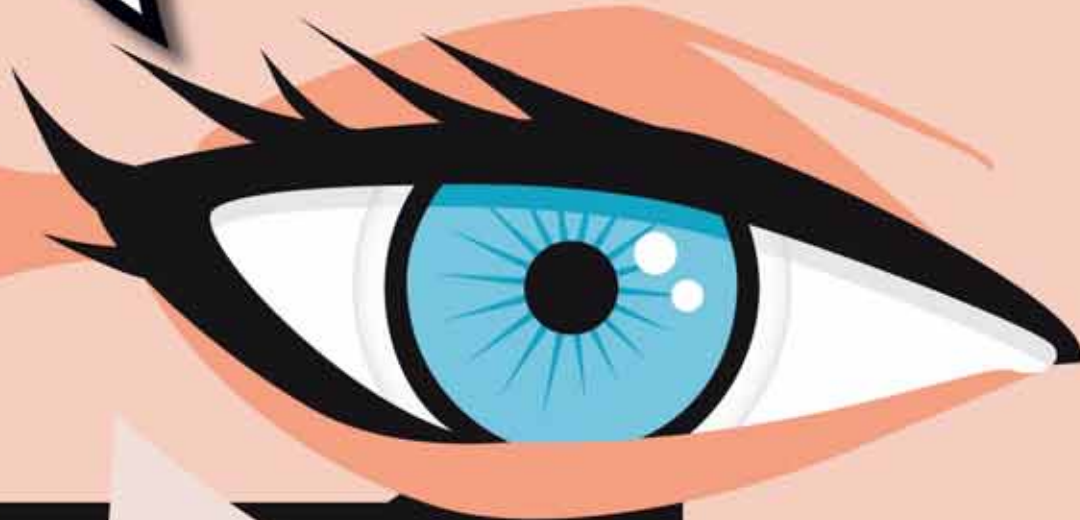


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OUR CONTACTS?



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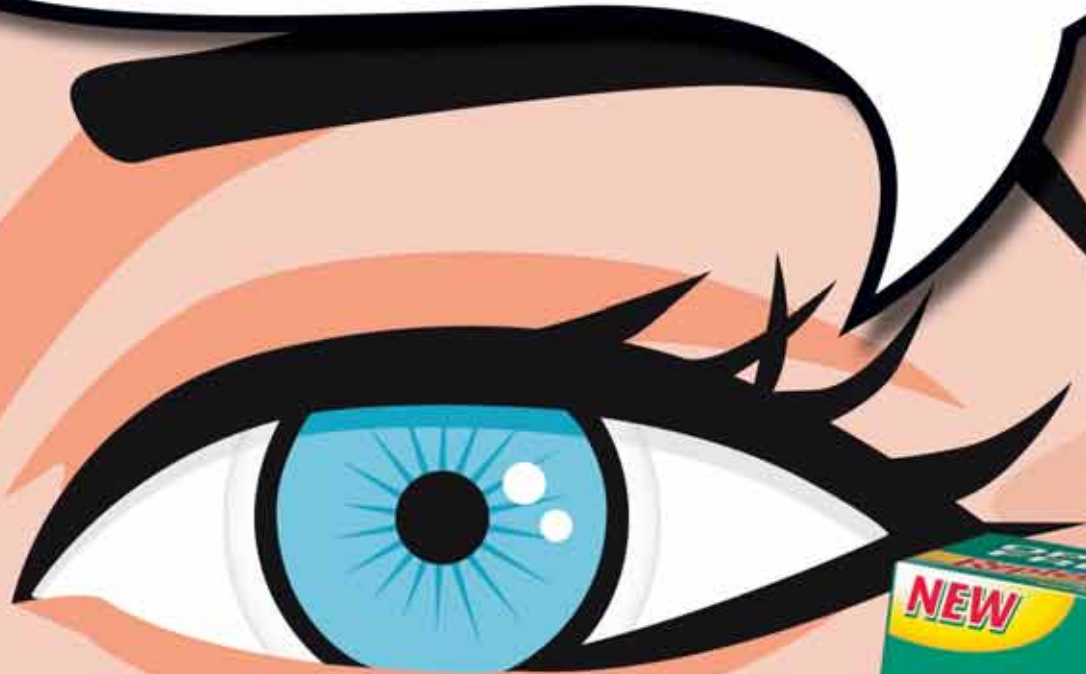
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President's Column

Getting the truth out there



Richard L.
Wallingford, O.D.

It has been said that “the truth is a standard above which public relations cannot rise.”

However, public relations is a powerful tool for making people aware of the truth. Without access to facts, people reach wrong conclusions.

For optometry, simply making the public, and lawmakers, aware of the facts concerning what we do will help us keep the profession strong and our patients served properly.

That’s the positive side of public relations, and the basic rationale behind our investment in a major public awareness program.

There’s also a darker side of PR, which is when people manipulate facts to mislead the public.

One of the most blatant examples of the misuse of public relations is the campaign by organized ophthalmology to discredit our profession, our education and our concern for our patients.

Time after time, we’ve seen outrageous efforts by ophthalmology. For example, in Washington, DC, they portrayed us as wanting to undermine care for veterans. In Oklahoma, optometrists were portrayed as used car salesmen. In Florida, they ran TV spots disparaging optometrists and urging the public to

“see an ophthalmologist.”

In efforts to thwart professional exchange of ideas, they’ve even attempted to ban optometrists from ophthalmology-sponsored

meetings. Unfortunately, there is a large audience who has not been hearing us.

For the health of our profession, and the sake of our patients, it has been clear for some time that the truth needs

For the health of our profession, and the sake of our patients, it’s been clear for some time that the truth needs some amplifying.

some amplifying.

To do that, we recognized that changing public perception is not something that happens overnight, or that we could do on our own. That’s why, in

meetings.

Fortunately, the truth rises above such tactics. The patients and public that we serve, given truthful accounts, can see through the disinformation.

That’s why, in

January 2005, we asked the leading international public affairs firm, Hill & Knowlton (H&K), to present their program plans to the AOA Presidents’ Council. H&K representatives also made a presentation at the 2005 Spring Planning Conference. The May 23, 2005, AOA News featured a page one story on the planned program.

Then, last July, we described the situation to the AOA House of Delegates and requested they ratify plans for a large-scale public awareness campaign.

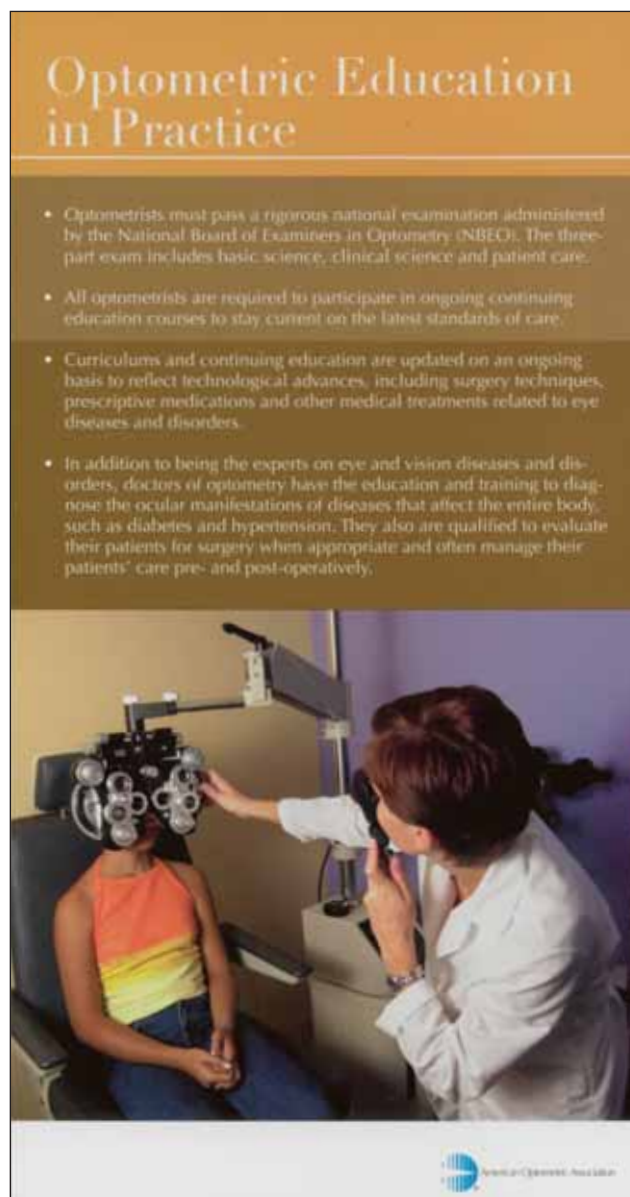
The result is an Optometry Awareness and Public Affairs Campaign conducted by AOA and H&K.

At the AOA Presidents’ Council in January 2006, representatives of H&K updated state optometric association leaders about the program’s accomplishments so far.

The campaign has focused on positively positioning the profession at a national level and providing communication tools and consultation to use at the affiliate and local level. H&K is also providing strategic support to help counter attacks by organized ophthalmology.

Obviously, before we can place the first call to a reporter, or send out a news release, we need to determine what our message is; that is, how we believe the public should view us.

In conjunction with interviews of optometrists, and a great deal of other research, (see related



An informative card describing optometrists’ level of education is part of “Optometry: Doctors on the Frontline of Eye and Vision Care,” an optometry brochure that will soon be finding its way into the hands of key opinion leaders. The brochure is part of a large-scale public awareness program commissioned by AOA.

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Brooks files for AOA secretary-treasurer

Randolph Brooks, O.D., has filed for the AOA office of secretary-treasurer.

Dr. Brooks, currently a board trustee, was first elected to the board in June 2000 and re-elected in 2003.

Dr. Brooks is on the Constitution and Bylaws Committee, as well as the Finance Committee.

As a member of the Advanced Clinical Competence Project Team, he served as chair from 2004-2005.

Dr. Brooks is currently serving as liaison-trustee to the Advocacy Group, Eye Care Benefits Center, Federal Relations Committee, and

Optometry Awareness and Public Affairs Committee.

As a board member for the past three years, Dr. Brooks has served as liaison-trustee to various AOA committees.

Prior to his election to the board, Dr. Brooks held a variety of volunteer appointments within AOA.

In addition to serving several years on the Eye Care Benefits Center Executive Committee, Dr. Brooks was its chair for 1999-2000.

Dr. Brooks is a past president of the New Jersey Society of Optometric Physicians (NJSOP).

In 1995 and 2000, NJSOP named him Optometrist of the Year.

Dr. Brooks is a graduate of the State University of New York at Albany and the New England College of Optometry and is also a fellow of the American Academy of Optometry, of which he has been a member since 1984.

He has a private group practice in LedgeWOOD, NJ, and lives in Succasunna, NJ, with his wife, Bonnie. He has three sons, Doug, Larry, and Ryan.

Dr. Brooks' interests include flying, bicycling, fishing, and hiking.



Randolph Brooks, O.D.

South Dakota gets licensure by endorsement

South Dakota Gov. Michael Rounds (R) signed HB 1036 on Feb. 14, giving the Board of Optometry the authority to offer licensure by endorsement.

The board may offer the possibility to currently licensed candidates from another U.S. jurisdiction where the requirements for licensure are deemed to be equivalent.

"We tried something different in South Dakota," said Daniel A. Watson, O.D., executive secretary, South Dakota Board of Optometry. "We went through the department of health, which the board of optometry is under."

The board will establish the parameters for the process of licensing optometrists by endorsement through rule making and will have a hearing on the rule changes in April or May.

The bill was also endorsed by the South Dakota Optometric Society (SDOS).

"The bill came up this year," said James Barnett, O.D., SDOS president. "It was nothing controversial. It just eliminated the requirement of reciprocity."

Dr. Barnett also noted the application fee was increased from \$50 to \$175 to make it more equitable with the application fee for new optometrists applying for licenses.

The AOA House of Delegates adopted a resolution in June 1995 officially supporting the process of licensure by endorsement, as established at the state level; and encouraging the affiliated state associations and individual state optometry boards to actively seek the adoption of legislation or rule changes to establish endorsement.

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Truth, from page 4

story, below), H&K worked with the AOA to identify the fundamental goal of the campaign: *to enhance and protect optometrists' ability to serve patients to the full extent of optometric education and training.*

That led to three clear communications objectives:

- ❖ Better position optometry,
- ❖ Create greater awareness of who optometrists are and accentuate what we do, and
- ❖ Protect against unfounded attacks.

It's also important to know what the program is *not*. It is *not* an advertising campaign, and it is *not* a program where H&K does all the outreach work in each state. Instead, the agency develops the tools we need and helps us to use them effectively.

Key themes

One of the hallmarks of a strong public awareness program is a focus on statements that support the overall program goal. Such statements should be memorable and truthful.

Based on research, the key themes of our campaign include:

- ❖ Optometrists are highly qualified doctors trained in both general and eye health.
- ❖ Doctors of optome-

try take a leading role in an individual's overall eye and vision care, health and well-being.

❖ Optometrists are the primary providers of eye care in the United States.

❖ Optometrists play a key role in the total quality of life for patients.

❖ Patients increasingly benefit from the wide and expanding range of eye care today's optometrists provide.

Thanks to the wealth of resources that H&K can marshal, those

The program is not an advertising campaign, and it is not a program where H&K does all the outreach work in each state. Instead, the agency develops tools and helps us to use them effectively.

messages can be fashioned with a wide range of communications tools.

One example is the brochure: "Optometry: Doctors on the Frontline of Eye and Vision Care."

Another is media training for leaders at various levels of optometry to help them communicate to the press in an effective way, making sure to include the themes that reflect optometry's expertise.

In addition, the agency has created tool kits to help ODs better

communicate. The kits cover five core legislative issues: Children's Vision; Co-management; Expansion of Prescriptive Authority; Surgery (reactive and proactive versions); and Laser Surgery.

Legislative issues

H&K initiated strategies and developed language in those five key issue areas for the benefit of states facing the issues now and those who very well

might in the future.

Issues may change as the needs of the profession change, assuring flexibility and relevance.

All 50 states received legislative questionnaires; and benefited from the identification of best practices and the public awareness effort in other states.

H&K identified 26 issues states (states facing one or more of five scope of practice areas) and helped them with language and materials, and, in some cases, strategic counsel.

Six states were engaged in legislative campaigns that are considered "key to the profession."

In those states, H&K provided strategic and tactical support, such as message development, communications templates, and media outreach.

There was also work done by H&K at the federal legislative level, including strategic messaging to bolster AOA's successful efforts to enact legislation to

regulate decorative contact lenses and to build support for the children's vision program before Congress.

H&K also consulted with AOA's Washington office on optometry's role in the White House Conference on Aging.

Fast responses

When erroneous information appeared in the media, H&K provided reactive/editorial responsive media outreach to publications such as *American Medical News*, *The Washington Times*, *American Legion Dispatch*, *The Oklahoman*, *Cataract & Refractive Surgery*, and *SmartMoney Magazine*.

Even more important is the proactive outreach to the media, resulting in coverage by CBS MarketWatch, *Forbes*, *US News and World Report*, the *New York Times*, the *Dallas Morning News* and many others.

The largest proactive program to date was last fall's Ready for School Campaign, which stressed the importance of children's eye exams and the relationship between vision and learning.

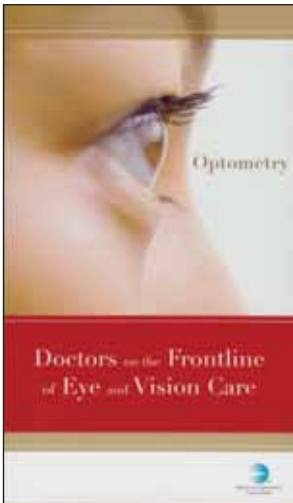
Key components of the campaign included:

- ❖ TV satellite media tour
- ❖ Radio satellite media tour
- ❖ National print, trade and select consumer print outreach
- ❖ Outreach to national morning network news shows

Results included appearances on three national TV shows and 353 local stations.

There were three national radio airings and 7,881 local airings, and 19 print/online "hits."

As Congress was working on the



Research-based program

H&K worked with research firm Penn Schoen & Berland to evaluate the public's knowledge and perception of the ophthalmic professions including:

- ❖ Differences among ophthalmic professions
- ❖ Optometry core messages and ophthalmology messages
- ❖ Optometry terms and taglines
- ❖ Ophthalmology research

To better understand ophthalmology's position and anticipate future action, H&K conducted research in areas such as its:

- ❖ Consumer marketing and philanthropic involvement
- ❖ Positioning initiatives and profession messaging
- ❖ Legislative outreach
- ❖ Allied/doctoral professions vs. MDs

To establish best practices, H&K conducted research into 14 competitive situations.

Research-based key messages include detailed supporting information and serve as the foundation for all campaign materials.

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Decorative Contact Lens Bill, AOA was working with H&K to get its concerns heard about the potential health hazards resulting from the misuse of decorative lenses via a second national campaign.

Coverage included Associated Press, *Forbes*, ABC News and many others. Coverage aired in 37 states and Washington, DC, on 114 TV stations, 26 print outlets and two radio stations.

Optometry key messages

As one of the most important aspects shaping the framework of the campaign, the optometry key messages continuously will be updated as new issues, language and focal areas evolve.

Among the tasks that lie ahead:

- ❖ Revisit existing tool kits, add new kits and refresh messaging and update research and information as necessary.
- ❖ Consider adding inserts to the brochure concerning infant and adolescent vision care, elderly vision care, research/new technologies and other topics.
- ❖ Create fact sheets and issue papers to convey optometry's messaging on specific topics and issues.
- ❖ Create a direct mail postcard for AOA to customize, print and distribute to patients and lawmakers on a topic to be determined.
- ❖ Position AOA/optometrists as "go to" experts on eye health and wellness and as a source for the media.

Through these projects, and many others on the drawing board, we plan to increase awareness about the profession of optometry while enhancing a general brand awareness

for AOA, provide information to reporters who regularly cover health and wellness, and identify third-party allies and partnerships.

The bottom line

This is a lot of work, and it is costing the association a lot of money, which ultimate-

ly is paid by all AOA members.

As an association, we have to look at the results continually, and ensure that the program is helping the public see us as we are, not as our opponents would like to paint us. The AOA Optometry Awareness and Public Affairs Committee is tasked with oversight of the

program, and ensuring that it meets the evolving needs of the profession.

Consider our stated goal again: *to enhance and protect optometrists' ability to serve patients to the full extent of optometric education and training.*

I think that is a goal worth fighting hard for. Just like the truth.

Richard L. Wulfsberg

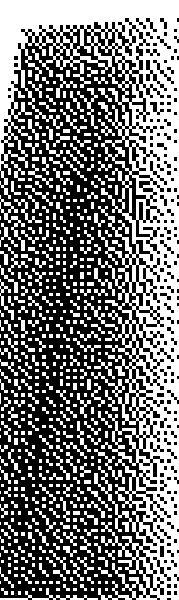


Simply put, our members come first — always.

They're the ones who develop the programs, make all the tough decisions, and work hard to make sure the association is always there for them. That's why we're always there for them.

✓ **"The service during your life can make a difference in the quality of your life."**

The members of the association are the ones who make the difference. They're the ones who make the difference in the quality of your life.



And when you need it, we're there for you. That's why we're always there for you.

✓ **Our members' personal health, safety and happiness.**

The members of the association are the ones who make the difference. They're the ones who make the difference in the quality of your life.



✓ **Our ability to keep doing what we do best.**

The members of the association are the ones who make the difference. They're the ones who make the difference in the quality of your life.

If you can't spend this money, please don't spend it. Please don't spend it.

Join the association today. It's the best way to make a difference in the quality of your life.

Join today! April 30, 2006 by June 30, 2006. A FREE OF CHARGE. Don't miss it.





Eye on Washington

Identifier, from page 1

subcontractor, began accepting applications for NPIs on May 23, 2005.

Major health plans, including Medicare, Medicaid, and most private health insurance issuers, as well as all health care clearinghouses, will be required to accept and use NPIs in standard transactions by May 23, 2007. Small health plans will have until May 23, 2008.

providers, through most of this year, will have to continue to include their Medicare numbers—or “legacy identifiers”—on the claim forms as an additional form of identification.

“Medicare systems will accept claims with an NPI, but an existing legacy Medicare number must also be on the claim,” CMS emphasized in a recent *Medlearn Matters* article. “Note that CMS claims processing systems will reject as unprocessable any claim that includes only an NPI.”

Beginning Oct. 2 of this year, CMS systems will accept an existing legacy Medicare billing number and/or an NPI on claims.

The Medicare billing system, by that time, will be capable of using the NPI as the primary identifier for providers with the legacy Medicare number used as a back-up. (However, providers will be “strongly encouraged” to continue using Medicare numbers on their claims at that time, according to CMS. Providers who do not use both identifiers could still risk nonpayment.)

By May 23, 2007, however, Medicare, and most other public and private health plans, will be accepting only NPIs as a form of identification on Medicare claims. A new, modified CMS 1500 claim form has already been developed to accept the NPI.

The NPI should greatly simplify health care administration for everyone involved, including health care providers, according to CMS.

“The use of the NPI will improve the

Medicare and Medicaid programs, and other Federal health programs and provide health programs, and the effectiveness and efficiency of the health care industry in general, by simplifying the administration of the health care system and enabling the efficient electronic transmission of certain health information,” according to an agency statement.

However, NPIs also hold benefits for individual practitioners, according to CMS. “In order to administer their programs, health plans—including federal programs like Medicare, state-administered programs like Medicaid, and private health plans—assign identification numbers to their providers of health care services and their suppliers,” CMS noted.

“However, those identifiers frequently are not standardized within a single health plan or across health plans, which results in a single health care provider having a different identification number for each health plan, and often having multiple billing numbers issued within the same health plan. This complicates the health care provider’s claims submission processes and may result in the assignment of the same identification number to different health care providers by different health plans.”

The AOA Advocacy Group notes the required use of the NPI as provider identification on claim forms will effectively end the practice on the part of some insurance companies of using Drug Enforcement Agency (DEA) numbers

as a form of provider identification. DEA has long complained that the practice represents a misuse of a system the agency intended solely for the tracking of controlled substances.

Many optometrists who do not hold DEA numbers have long complained that the use of DEA numbers as a form of provider identification has effectively barred them from participation in some insurance programs.

While the NPI will greatly simplify the process of identifying health care providers, it will not replace registration as a Medicare provider, state licensure or other processes, both CMS and the AOA Advocacy Group note.

NPI numbers are assigned free-of-charge. However, it takes about 20 minutes to complete a required questionnaire and submit an application.

NPI numbers are being issued through the National Plan and Provider Enumeration System Web site (<http://nppes.cms.hhs.gov>).

Health care providers can complete their applications online or use a downloadable application form, also available on the site, that can be printed and submitted by mail.

Additional information on the NPI can be obtained on the National Provider Identifier page of the CMS Web site, <https://nppes.cms.hhs.gov/> or at (800) 465-3203.

AOA members can quickly access the National Plan and Provider Enumeration System application Web site through the link on the AOA Web site.

Wait grows longer for Medicare paper claims

Beginning this month, health care practitioners who use paper claims to bill Medicare will have to wait at least two additional days to receive payment.

Carriers, effective March 13, will begin paying paper claims no sooner than 29 days after receipt. Carriers now process paper claims a minimum of 27 days after receiving them.

The U.S. Centers for Medicare and Medicaid Services (CMS) notified carriers of the Congressionally authorized change in the “floor date” for Medicare paper claims processing in a Feb. 10 change request (CR4284). (The change requests can be found on the CMS Web site at www.cms.hhs.gov/Transmittals/downloads/R850CP.pdf.)

Providers with questions regarding the change should contact their respective Medicare carriers. Their toll-free numbers can be found online at www.cms.hhs.gov/apps/contacts.

“After those compliance dates, health care providers may use only their NPIs to identify themselves in standard transactions, where the NPI is called for,” CMS emphasized.

Medicare actually began the process of phasing in the use of NPI numbers on its claims forms early this year.

Since Jan. 3, NPI numbers have been accepted as a means of identifying health care providers on Medicare fee-for-service claim forms—although



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Fig. 1. The three main nutritional supplements from AmeriSciences

From ADA Web Page

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Contact Lens and Cornea Section
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LJRickard@aoa.org
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ILAMO@aoa.org
Credits-AOA CE
800-365-2219 x256

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AmOptCOR@aol.com
Diabetes Initiative - CMS
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KHipp@aoa.org
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LABoyland@aoa.org
Environmental/ Occupational Vision
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JLWeaver@aoa.org
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Eye Care Benefits
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TWeaver@aoa.org
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JFHymes@aoa.org
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BTKowalczyk@aoa.org
Hospital Practice
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BTKowalczyk@aoa.org
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Infants' & Children's Vision Coalition
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JLWeaver@aoa.org
InfantSEE™
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TWeaver@aoa.org
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Visionlink x102
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TWeaver@aoa.org
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SLThomas@aoa.org
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JFrazier@aoa.org
Medicare Policy
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Notice to members:

AOA's staff phone numbers will be changing soon. When calling AOA, listen carefully to the prompts. The new phone numbers will be published in AOA News and at www.AOANews.org as soon as they become available. E-mail addresses will remain the same.



Calling AOA? Help us serve you better.

When calling, if you leave a message be sure to include information on whether the number is for your home or office and from what time zone you are calling. Better, include information on the best time for AOA staff to return your call.

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JLWeaver@aoa.org

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Practice Management Materials
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LDSmith@aoa.org
Practice Strategies
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RFPieper@aoa.org
Primary Care
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JLWeaver@aoa.org
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SLThomas@aoa.org
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SDBrown@aoa.org
Quality Assessment and Improvement
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BTKowalczyk@aoa.org
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Seal of Acceptance
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JLWeaver@aoa.org
Sports Vision Section
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DBKincaid@aoa.org
State Licensure/ State Optometry Laws
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SLCooper@aoa.org
Student and Faculty Programs
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LWbergman@aoa.org
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Memberservices@aoa.org
Third Party Issues
703-739-9200
TWeaver@aoa.org
Travel Reimbursement
800-365-2219 x239
VAN - Vision Awareness Network (formerly AFVA)
800-365-2219 x226
dfox@aoa.org
VISION USA
800-365-2219 x261
VISIONUSA@aoa.org
Web Site Information
800-365-2219 x219
GCWilton@aoa.org

Connors to become WCO president at May meeting

The World Council of Optometry (WCO) will hold its Fifth Session of the World Conference on Optometric Education (WCOE5) in Milan, Italy, May 3-5, 2006.

The conference will focus on expanding educational resources and infrastructure given the challenges of VISION 2020: The Right to Sight, a global initiative that aims to eliminate avoidable blindness by 2020.

"VISION 2020: The Right to Sight challenges optometry to train new personnel, improve human resources, strengthen the eye care infrastructures, and optimize technology in an effort to eliminate avoidable blindness," said Victor Connors, O.D., WCO president-elect and former AOA president.

Dr. Connors will assume the WCO presidency during the General Delegates Meeting held in conjunction with WCOE5.

World-class speakers will address key issues facing optometric education, such as teaching and learning strategies, educating eye care practitioners for Vision 2020: The Right to Sight, industry's role and impact, faculty and curriculum in developing programs, and competency-based strategies for assessment.

The panel of experts will include:

- ❖ Paul Berman, O.D., senior global clinical advisor and founder, the Special Olympics Lions Club International Opening Eyes
- ❖ Serge Resnikoff, World Health Organization
- ❖ Hannah Faal, eye care program consultant for West Africa, Sight Savers International
- ❖ Ramachandra Pararajasegaram, past president, International Agency for the Prevention of Blindness

For more information, visit www.world-optometry.org.

Dr. Burns garners 'Practice of Year'

John Burns, O.D., and his team at Eye Design in Clinton, M.D., were recently named "Practice of the Year for 2005" by The Power Practice®, an optometric consulting company.

The award is given each year at the Power Practice's annual national client meeting and is awarded to practices that demonstrate exemplary clinical skills and patient care services.

Dr. Burns was selected from more than 300 optometrists at the company's recent meeting in San Diego.

"It has been a pleasure working with Dr. Burns and his staff over the last 10 years. They have shown an unwavering commitment to provide the best level of patient care and services to their patients and that made them the clear choice for this year's award," said Gary Gerber, O.D., president and founder of The Power Practice®.

The meeting, which is only open to clients, featured a full day of practice-building education from non-industry thought leaders in fields as diverse as restaurant and hotel management and horse training.

Clients are then challenged to adapt the content to their optometry practices.

"This is my third meeting," said Dr. Burns "and each year the content gets better and better. It's great to hear from others outside our industry and interact with clients to apply the unique strategies we learn at these meetings."

'Caring' booklet available

For a limited time, "Caring for the Eyes of America" will be available at a reduced price.

Copies ordered by May 15, 2006, are just \$229. After May 15, the price will be \$279.

For AOA members, "Caring for the Eyes of America" is just \$39 if ordered by May 15 and \$59 after that date.

To place an order, or for more information on ordering multiple copies, contact Debra Misuraca at (800) 365-2219, ext. 238, or DKMisuraca@aoa.org.



AOA NewsLetter brings AOA News to your inbox

Subscribers to AOA NewsLetter get the AOA News electronically, along with extra articles, Web exclusives and the option of reading the News as an Adobe PDF document. Look for it monthly!

Work Hard, Play Hard

You work hard providing the best possible eye care to patients who depend on you. You need the latest up-to-date information. Get it from the most knowledgeable, experienced optometrists as they share their extensive clinical expertise with you. And after a full day of the finest education available, play just as hard, as you enjoy the best beaches, the finest fare, the most luxurious resorts and the rewards you deserve for working so hard.

Our 2007 season is now available for early registration discounts!

<p>CENTRAL AMERICA</p> <p>FEB. 21-25, 2007</p> <p>COLUMBUS MANUELITO ROADIE RESORT</p> <p>COSTA RICA</p> <p>MARCH 21-25, 2007</p> <p>PARADISE PLAZA CONVENT</p> <p>THE CARIBBEAN</p> <p>APRIL 11-15, 2007</p> <p>FRANCIS BEACH RESORT & MARLIN RESORT</p> <p>ARADONUT BEACH RESORT</p>	<p>SEVENTH HAVEN</p> <p>JULY 18-AUGUST 8, 2007</p> <p>SEVENTH HAVEN</p> <p>The Sevil Pier Out, July 18-24</p> <p>CARIBBEAN BEACH RESORT</p> <p>Paradise, July 24-30</p> <p>UNION (ARADONUT) BEACH</p> <p>The Ocean, July 28-August 8</p>
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Register online at our website: www.tropicalseae.com or phone: 281-992-0002

DON'T MISS OUT ON THE INCREDIBLE EDUCATION AND ADVENTURE EXPERIENCE!!

Friday CE courses: Full day of education

Thanks to our generous education sponsors, Friday at Optometry's Meeting™ means several complimentary courses will be available.

"Friday's continuing education courses are designed for the primary care 'generalist' optometrist. Nearly every part of the eye, and every common ocular condition, are covered in individual courses. Special testing, including visual fields and newer technologies such as OCT, HRT and GDX are being performed more and more by optometrists, and these diagnostic modalities are all covered in different courses, including the coding and billing of specialty tests," said Kirk Smick, O.D., CE chair for Optometry's Meeting™.

"Whatever part of your practice you feel you need to 'bone up' on, there is a course to meet your needs."

Attendees can start the day by choosing between two free breakfast seminars.

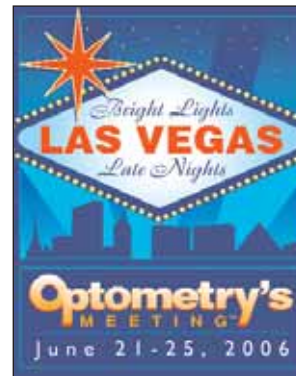
Zieler Ophthalmic Systems is sponsoring "Advances in Tonometry—a Better Way to Measure IOP," Course #B201 on Friday, June 23 from 6 a.m. to 7:30 a.m. (Lecturer: R. Wooldridge, O.D.)

The seminar will present evidence for a new standard of care in measuring intraocular pressure using the Paschal Dynamic Contour Tonometer.

Advanced Medical Optics (AMO) is sponsoring the other breakfast seminar, "Keys to Contact Lens Comfort," Course #B202 from 6 a.m. to 7:30 a.m. (Lecturer: T. Quinn, O.D.)

This seminar will highlight the important clinical considerations for optimizing contact lens success and avoiding contact lens dropout.

Following breakfast, Allergan will sponsor a



free course titled "Anterior Segment Update: Dry Eye and Ocular Infection Control" from 8 a.m. to 10 a.m.

Course #2008 will feature a panel presenting the newest techniques and treatments of dry eye, anterior segment infections, and other maladies used by optometrists. (Moderator: P. Ajamian, O.D.; Lecturers: D. Devries, O.D.; M. Dunbar, O.D.; K. Mastrotta, O.D.; E. Schmidt, O.D.)

Carl Zeiss Meditec is sponsoring "New Technologies for the Management of Retinal Disease and Glaucoma," Course #2210, from 10 a.m. to noon.

The course will review current laser-imaging instrumentation and its use in clinical practice and feature case studies highlighting the advantages and limitations of available technology. (Lecturers: M. Dunbar, O.D.; B. Gaddie, O.D.)

In addition, CooperVision is sponsoring "The Ultimate 'How To' Contact Lens Patient and Practice Management Symposium—2006 Update," Course #2310, from 10 a.m. to noon.

This course will present a forum covering the challenges facing the contact lens specialist. (Lecturers: B. Eiden, O.D.; A. Epstein, O.D.; P. Klein, O.D.; J. Schaeffer, O.D.; L. Sclafani, O.D.; C. Sindt, O.D.)

"Clinical Updates

and Troubleshooting with Corneal Reshaping Lenses Featuring Paragon CRT & Z-CRT," Course # 2710, will be from 10 a.m. to noon and is sponsored by Menicon and Paragon Vision Sciences.

This course will review the pre-screening, fitting, and follow-up for patients with Paragon CRT lenses for corneal reshaping. (Lecturer: P. Caroline; R. Sakamoto, O.D., Ph.D.)

"Retina Grand Rounds: Taking Advantage of Technology," Course #2810, will be from 10 a.m. to noon and is sponsored by Optos.

The course will highlight both common and uncommon retinal pathology in a case-based format and will feature diagnostic techniques and the latest imaging technology. (Lecturer: J. Gerson, O.D.; K. Lambrechts, O.D.)

In the afternoon, Officemate Eyecare Business Solutions, a division of Marchon, is sponsoring "Case Management in a Technology-Integrated Practice," Course #T222 and T223, from noon to 1 p.m. and again from 1:30 p.m. to 2:30 p.m. in the AOA Education Theater in the Mandalay Bay exhibit hall. (Lecturer: I. Lane, O.D.)

This free interactive program will review and demonstrate the elevated standard of patient care when current technologies are integrated into electronic health records.

Alcon is sponsoring "Evidence-Based Medicine in Contact Lens Practice," Course #2312, from 1 p.m. to 2 p.m. (Lecturers: R. Hill, O.D.; D. Korb, O.D.; R. Mandell, O.D.; K. Polse, O.D.)

New in Practice

Panel of Experts Series

Have you considered and practice management series to attend the New in Practice Panel of Experts Series at Optometry's Meeting™ in Las Vegas, Nevada on June 23, 2006. Learn and take away practical advice and the panel series of experts will discuss a range of popular practice management topics that raised questions by just starting their careers or trying to change practice settings.

This program is available through a speakers' bureau price by AOA Medical Services Company.

Subject matter for this session:

- Billing and Coding, Course #2009, Fee \$110
- Staff Management, Course #2110, Fee \$110
- Financial Management, Course #2111, Fee \$110
- Customer and Service, Course #2112, Fee \$110

For a complete list of speakers and topics, visit our website at www.aomsg.com or call 1-800-845-2345.

Friday, from page 12

The free course will examine the new role of evidence-based medicine (EBM) and its application to today's contact lens practice.

CIBA Vision is sponsoring **"The Future of Eye Care: Treatment Options for Continuous Vision and the Medical Management of Their Complications,"** Course #2315, from 2 p.m. to 5

p.m. (Lecturers: D. Mann, O.D.; R. Melton, O.D.; J. Schaeffer, O.D.; J. Thimons, O.D.; R. Thomas, O.D.)

This course will cover available treatment options for continuous visual correction, such as continuous contact lens wear, LASIK, CRT, Phakic IOLs and wavefront-driven technology, as well as medical man-

agement strategies for possible complications.

Registrants for this course will receive three hours of education for the price of one through a generous grant by CIBA Vision.

Finally, AMO is sponsoring **"Refractive Technology in the New Millennium,"** Course #T224, from 3 p.m. to 4 p.m. in the Education

Theater in the Mandalay Bay exhibit hall. (Lecturer: S. Black, O.D.)

The free course will discuss changes in refractive surgery over the last five years, including technological advances and their effects.

Make sure to take full advantage of all of the wonderful CE available on Friday, June 23 at Optometry's Meeting™.

CE program at Optometry's Meeting™ includes two-fers and three-fers

By Kirk Smick, O.D., CE Chair of Optometry's Meeting™

This year's CE program, June 21-25, boasts many new topics and formats. In Las Vegas, we will have numerous courses that attendees will not want to miss!

On Wednesday afternoon, don't miss a three-hour panel presentation titled, **"Cataract Surgery Update: Procedures, Materials and Designs."** Sponsored by AMO. Join a prestigious panel of optometrists and ophthalmologists as they cover new IOL lens designs. The panel will also review the different materials that IOLs are currently being manufactured from as well as some of the newer techniques in cataract surgery.

Following the General Session on Thursday morning, be sure to invite the whole office to attend a two-hour panel presentation titled, **"Our Patient for Life: Considering the Dynamics of Providing Seven Decades of Eye Care to a Single Patient."** This panel presentation, sponsored by Alcon, weaves the expertise of six presenters, all bringing their special insights and recommendations into one patient's lifetime of eye care.

On Thursday afternoon, join ten key female opinion leaders as they present, **"Anterior Segment: Rapid Fire Update,"** which will cover topical and oral therapeutics, keratitis, dry eye, the newest contact lenses and solutions, and wavefront technology in a rapid-fire format. Listen carefully to this course sponsored by Allergan or you'll be asking "What Did She Say?"

Optometry's Meeting™ promises an education packed Friday, with numerous courses for the OD to attend. To kick off the day of education, join a dynamic panel of optometrists for a two-hour panel presentation titled, **"Anterior Segment Update: Dry Eye and Ocular Infection Control."** Sponsored by Allergan. This course will discuss several new products that are available for the treatment of dry eye, anterior segment infections and other maladies. This panel will present the newest techniques and treatments used by optometrists.

On Friday and Saturday, attendees can get more for their dollar! We have four courses in the

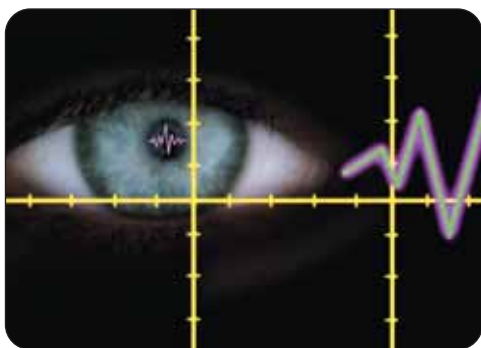
education program this year whose course fees have been reduced thanks to generous education grants.

Register for a three-hour symposium titled, **"The Future of Eye Care: Treatment Options for Continuous Vision and the Medical Management of Their Complications"** and receive three hours of education for the price of one-hour! Sponsored by CIBA Vision on Friday. This symposium assembles a panel of world-renowned experts that will present the treatment options available today to restore continuous vision to our patients. The series of presentations will allow you to expand the treatment options to normalize your patient's visual status and manage the medical complications that will arise from the treatment.

Attend one, two or all three of the two-hour education courses sponsored by Bausch and Lomb on Saturday and receive two hours of education for the price of one hour! The program, titled **"Ultimate Grand Rounds"** is designed as an interactive session that allows the participant to engage in diagnosis and management of various visual conditions and ocular disease presentations. The speakers are some of the top experts in each of their fields and will engage the audience in a series of grand round cases emphasizing the newest tools in diagnosis and treatment of each ocular condition. The courses in this session are **"Ultimate Grand Rounds in Anterior Segment Disease," "Ultimate Grand Rounds in Light Architecture and Correction of HOAs"** and **"Ultimate Grand Rounds in Posterior Segment Disease."** Attendees that register for any of these courses will only pay for one hour of education per course and will be invited to a Bausch and Lomb Saturday evening reception!

Be sure to take advantage of the extensive amount of education being offered at Optometry's Meeting™. It's all up to you.

Come join us at the 109th Annual AOA Congress & 36th Annual AOSA Conference: Optometry's Meeting™.



Clinical News

ARVO offers online nanotechnology course free online

The Association for Research in Vision and Ophthalmology (ARVO) has launched its first online course, Nanotechnology and Nanomedicine: Applications for Vision. The course, presented at ARVO's 2005 Annual Meeting, is sponsored by a grant from the National Eye Institute (NEI) of the National Institutes of Health (NIH).

"This course provides an excellent introduction to the scientific

basis of nanotechnology and nanomedicine and conveys a sense of the exciting potential of these new fields for preventing disease and improving health," said NEI Director Paul Sieving, M.D., who organized the course with NEI staff member Richard Fisher.

Nanotechnology is a broad scientific field that involves the creation and use of materials and devices at the level of molecules and atoms. Nanomedicine is

an emerging field that is expected to yield highly specific medical treatments for damaged or diseased tissue at the level of single molecules or molecular assemblies within living cells (i.e., at the "nano" scale of about 100 nm or less).

This online course introduces fundamental concepts, including changes in the properties of materials at the nanoscale, and the potential of nanotechnology and its application to biomedical sciences. The underlying physical sciences, conveyed by renowned experts in nanoscience, are emphasized and the course includes examples of NEI-funded studies of either applied or fundamental nanoscience in vision research.

In addition to Dr. Sieving, course speakers

are: Mark Grinstaff, Boston University; Milan Mrksich, University of Chicago; Chris Murphy, University of Wisconsin; Mark Ratner, Northwestern University; Samuel Stupp, Northwestern University; and Karen Wooley, Washington University.

The course features streaming video of speakers with corresponding PowerPoint presentation slides. In addition, a transcript of the course is available online. The seven-presentation course runs approximately three hours. Each presentation can be viewed separately. Presentations range from seven to 35 minutes in length.

The course is available for viewing free-of-charge at www.arvo.org/nano.



Coming technologies, including nanotechnology, were the focus of a panel last month at the Optometry 2020 Summit. Shown here reporting the group's findings are, from left, Kenneth Eakland, O.D.; Helen Nguyen; Karen Hansen; Dennis Brtva, O.D.; and Charles Wormington, O.D. The moderator is Peter Bishop.

Responses urged to ongoing Medicare provider survey

Many health care providers selected to participate in federal government's Medicare Contractor Provider Satisfaction Survey may still have a little time to provide Medicare administrators with their assessment of their Medicare carrier's performance.

However, practitioners who receive survey forms should return them as quickly as possible, according to the Centers for Medicare & Medicaid Services (CMS).

"Many Medicare providers are taking the opportunity to voice their opinions on the administration of the Medicare program. The views of every provider asked to participate are important to the success of this study, as each one represents many other organizations that are similar in size, practice type and geographical location. The feedback from providers will be used to improve the program's efficiency," according to a CMS statement.

To be assured consideration, comments and recommendations must be received no later than 5 p.m. on April 4, 2006.

The CMS report on contractor performance is due in July.

Further information about the survey is available at www.cms.hhs.gov/MCPSS/.

Hypertension drug linked to phacoemulsification complication

Pharmaceutical maker Boehringer Ingelheim is notifying health care professionals that a surgical condition called intraoperative floppy iris syndrome has been observed during phacoemulsification cataract surgery in some patients taking alpha-1 blockers such as Flomax (tamsulosin HCl).

These drugs are used to treat benign prostatic hyperplasia and hypertension.

Most cases occurred in patients who were taking alpha-1 blockers at the time of the eye surgery, but in some cases the drug had been stopped prior to sur-

gery.

Health care practitioners should ask patients considering cataract surgery about whether they've taken Flomax or other alpha-1 blockers, according to a U.S. Food and Drug Administration (FDA) MedWatch Safety Alert.

If so, the ophthalmologist performing the procedure should be informed so that the surgical technique can be modified if necessary.

For additional information see FDA MedWatch Safety Alert - Flomax (tamsulosin HCl) (www.fda.gov/medwatch/safety/2005/safety05.htm#Flomax)

Phase I trials suggest sustained therapeutic effect with AMD gene therapy

GenVec, Inc., Feb. 7, announced the publication of results from a Phase I clinical study of its AdPEDF gene therapy in 28 patients with advanced neovascular age-related macular degeneration (AMD).

The findings, published in the February 2006 issue of *Human Gene Therapy*, showed evidence of a halt in disease progression lasting six to 12 months after patients received a single intravitreal injection of AdPEDF, according to GenVec.

There were no serious adverse events, severe ocular inflammation or dose-limiting toxicities reported.

Although the Phase I multi-center, open-label, dose-ranging study was not designed to show efficacy, patients in the group that received higher doses of AdPEDF showed no increase in the size of retinal lesions at six and 12 months post-injection, compared to patients in the lower dose group whose lesions increased over time.

Visual acuity in patients in the higher dose group was stable for the entire 12 months of the study, while those treated in the lower dose group appeared to show deterioration at six and 12 months.

Those findings suggest that a prolonged therapeutic effect may be achieved after a single injection of AdPEDF, according to GenVec.

AdPEDF is an adenoviral-based vector containing the gene for human pigment epithelium-derived factor

(PEDF), a protein which regulates blood vessel growth in the eye and protects the cells of the retina from damage. Previous animal studies have shown the potential benefits of increasing PEDF expression in the eye to prevent the angiogenesis that leads to vision loss.

In a commentary published in the same issue of *Human Gene Therapy*, Jean Bennett, M.D., Ph.D., professor of ophthalmology, cell and developmental biology at the University of Pennsylvania School of Medicine, wrote, "It is encouraging that evidence of a sustained therapeutic effect was seen . . . after one intravitreal injection. One advantage of a gene therapy approach compared with other treatment paradigms is that the molecule is produced at high levels within the target tissue and over a prolonged period of time."

A copy of the publication and the supporting editorial can be found on GenVec's Web site, www.genvec.com, by selecting Webcasts & Data/Recent Data Presentations/PEDF.

AMD affects almost 30 percent of adults between the ages of 75 and 85.

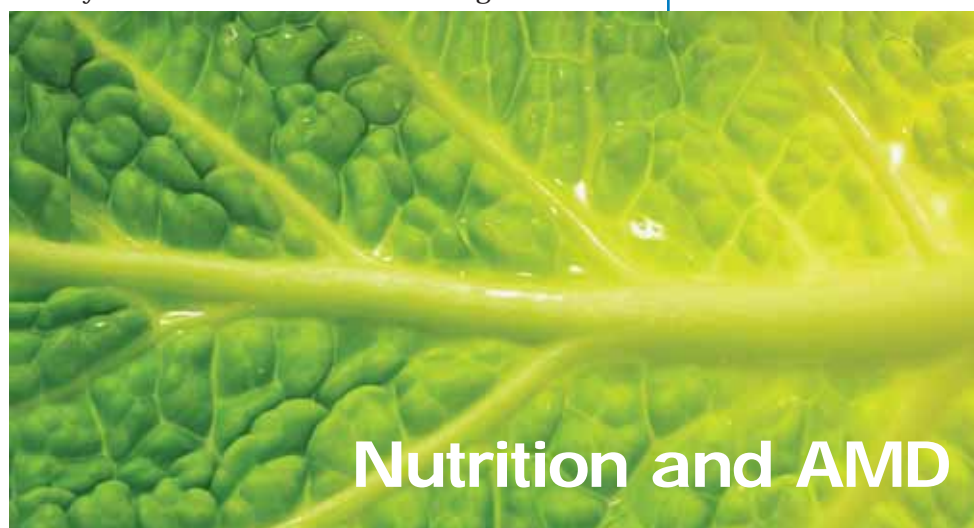
Other, recently introduced therapies to treat AMD have demonstrated benefits, but those therapies must be injected every four to six weeks. GenVec believes its gene transfer approach may provide an effective and more convenient treatment for AMD.

JAMA publishes Dutch study showing high antioxidant diet may reduce AMD risk

A new Dutch study suggests a diet high in specific antioxidants may delay the development of age-related macular degeneration.

Recent studies have already shown that

graded fundus color transparencies, using the International Classification and Grading System, in a masked fashion to determine incidence of AMD in follow-up examinations through 2004.



Nutrition and AMD

high-dose nutritional supplementation with beta carotene, vitamins C and E, and zinc can slow the progression of AMD, notes Redmer van Leeuwen, M.D., of the Erasmus Medical Centre in Rotterdam, the Netherlands, in the Dec. 28, 2005, issue of the *Journal of the American Medical Association* (JAMA).

However, the new study suggests those substances may be even more important in preventing AMD when people ingest them through normal diet than when taken in the form of supplements.

The population-based cohort study report used a semiquantitative food frequency questionnaire to assess dietary intake among all inhabitants, age 55 years or older, in a middle-class suburb of Rotterdam, from 1990 to 1993. Investigators then

Participants with an above-median intake of all four nutrients studied had a 35 percent reduction in risk for AMD.

Moreover, the association persisted after supplement users were excluded.

"Although in need of confirmation, our observational data suggest that a high intake of specific antioxidants from a regular diet may delay the development of AMD," the authors conclude. "Based on this study, foods high in these nutrients appear to be more important than nutritional supplements. Until more definitive data are available, this information may be useful to persons with signs of early AMD or to those with a strong family history of AMD."

AMD is the most prevalent cause of irreversible blindness in developed countries.



Advanced Medical Optics

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Luxottica Group

Marchon Eyewear

Optos

Signet Armorlite

TLC Vision Corporation

Transitions Optical

Vision Service Plan

VisionWeb

Vistakon, division of Johnson & Johnson Vision Care

Industry Profile is a regular feature in AOA News allowing participants of the Ophthalmic Council to express themselves on issues and products they consider important to the members of AOA.

Industry Profile: Bausch & Lomb

Today's contact lens wearers have embraced the enhanced vision, convenience and comfort that modern lenses provide. They also have become savvy about their purchasing options, and take advantage of inexpensive deals online and through national warehouses. Despite their resourcefulness, many stretch the length of time they wear the same lenses.

Patients who stretch their modality schedule increase the risk of bacterial binding and infection.

Stretching also reduces the number of times they need to purchase lenses, and it may reduce the frequency with which patients visit your practice, even for annual eye exams.

They'll Remember If It's Monthly

According to SCH & Associates research, 36 percent of contact lens wearers today are prescribed lenses with a month-long replacement cycle. But these are the patients who are most compliant—82 percent maintain the recommended monthly frequency for replacing lenses with a new pair. Compliance rates for wearers of two-week lenses drops to less than 33 percent.

This research also concludes that, in fact, 67 percent of these patients admit to stretching the wear of their lenses for up to twice as long as they should. The good news is that a majority of contact lens wearers confirm interest in a 30-day replacement modality.

With the advancements in silicone hydrogel lenses, Bausch & Lomb regards a monthly replacement cycle as allowing the lens surface to stay just as clean as a two-week cycle.

Silicone Hydrogel = Healthy Monthly Modality

According to Bausch & Lomb research, silicone hydrogel lenses with a monthly replacement schedule were superior to two-week replacement HEMA lenses in slit lamp findings, on-eye performance, patient symptoms and patient preferences.

Monthly Modality and a Better Bottom Line

Low compliance not only affects ocular health, but also the practice's financial health. Patients who stretch two-week lenses to four-week wear buy half as many lenses – and pay half as much per year.

Monthly modality provides as much convenience to your practice as it does to the lens wearer. A year's supply of four-week PureVision lenses equates to four boxes – easy to sell, easy to carry when compared with a year's supply of two-week lenses.

Your patients are also "pantry-stocked" for 12 months, and by the time they run out, they'll have returned to your office for their annual exam. This annual exam/ annual supply habit can become easier and more convenient for your patients than any other lens alternative.

Bausch & Lomb research revealed that patients on a monthly lens replacement schedule buy an average of 3.7 boxes of lenses a year– that's 93 percent of the four boxes they're supposed to purchase. Two-week wearers purchase an average of 5.2 boxes – a 65 percent conversion rate or 28 percent fewer lenses.

Simple Steps For Happy and Healthy Patients

The convenience and comfort that monthly-replacement lenses offer can make it easy for you to position them as the norm in your practice.



Many 2006 Winter Olympic athletes wore Carrera ski goggles and sunglasses while competing. Downhill skier Bruno Kernen of Switzerland, who won the bronze medal, is shown wearing the Fireball ski helmet and Kimerik ski goggle. For more information, visit www.carrerasport.com.

CIBA Vision names M. Kehoe new CEO

CIBA Vision, the eye care unit of Novartis, appointed Michael E. Kehoe chief executive officer on Feb. 21.

Kehoe will replace Joe Mallof, who joined CIBA Vision as chief executive officer in November 2002.

Kehoe will join CIBA Vision from Proctor & Gamble, where he worked for 27 years and held numerous leadership positions.

Kehoe was most recently the president of the Global Oral Care business.

In that role, Kehoe successfully led the global revitalization of brands such as Crest®, CIBA stated.

Kehoe also served as general manager of health and beauty products, Switzerland; general manager of beauty products, Germany; and vice president and general manager of paper products, Canada.

For more information about CIBA Vision, visit www.cibavision.com.



The Kenmark Group is adding new styles to its Wolverine Polarized Sunwear collection for Spring 2006. Each frame features a sporty design and polarized lenses to provide total UV protection for any outdoor activity. Designs range from sporty wraps to traditional rectangle shape sunglasses in both metal and plastic. Shown are styles Rugged and Tundra.

Industry News



VSP ranked one of best companies to work for on *Fortune's* national list

Fortune magazine ranked Vision Service Plan (VSP) No. 7 on its 2006 list of the "100 Best Companies to Work For."

The eye care benefits provider has been included on the list for the past seven years, but

this is its highest ranking yet.

"It gives us a great feeling to be recognized by *Fortune* magazine for the seventh consecutive year as one of best places to work," said Roger J. Valine, president and chief executive officer, VSP. "We are

committed to making VSP a great place to work for our employees, which in turn results in great service to our clients, members and doctors."

VSP's previous *Fortune* magazine rankings on the list of "100 Best Companies to Work

For" include No. 45 in 2000, No. 19 in 2001, No. 25 in 2002, No. 16 in 2003, No. 17 in 2004 and No. 10 in 2005.

The list was featured in *Fortune's* Jan. 23 issue.

For more information about VSP, visit www.vsp.com.

Alcon sponsors fountain for disaster relief fund

Attendees at Optometry's Meeting™ will have a chance to donate to the Optometric Disaster Relief Fund thanks to the support of Alcon, who is sponsoring a fountain for the charity.

Alcon will match all donations (up to a total of \$10,000) made at the Opti-Free RepleniSH® Fountain display, located inside the Mandalay Bay Exhibit Hall.

The fund is a 501 (c) (3) grant program that was established in the aftermath of Hurricane

Katrina in September 2005 to assist optometrists affected by any current or future disaster.

The fund is intended to provide affected optometrists with immediate financial relief at a time when they may have no income from their practice and may be spending large amounts of money to provide basic services for themselves and their families.

As a result of the program, 106 optometrists in five states had each received \$2,000 grants as of Jan. 31.

OCT device gets FDA OK

Heidelberg Engineering received U.S. Food and Drug Administration clearance for its SL-OCT™ product, claiming the world's first commercial optical coherence tomography (OCT) device used for cross-sectional anterior segment imaging.

The SL-OCT is mounted on a slit lamp, which Heidelberg says offers users both space and cost savings.

"The product provides easy-to-use, non-contact cross-sectional scans of the anterior segment," according to a company statement.

Pre- and post-surgical comparisons are possible with the SL-OCT, as well as chamber angle, pachymetry, flap thickness, corneal curvature and comprehensive biometric measurements.

The SL-OCT was first introduced in Europe and earned CE mark certification in 2003.

Heidelberg Engineering has marketed two other products in Europe based on OCT technology: OCPglobal™, a stand-alone pachymeter, and OCPonline™, an online pachymeter for integration into refractive laser systems.

Armani eyewear revenue to fight AIDS



Giorgio Armani unveiled part of a special capsule collection of eyewear, clothing, accessories, watches, jewelry and fragrances designed in support of Product Red.

U2's Bono and Bobby Shriver of The Global Fund helped launch Product Red as a new program by several companies to sell products with a portion of the revenue going to anti-AIDS programs.

Armani's first Red product is a pair of Emporio Armani sunglasses (Style EA 9285/S) featuring a single lens available in green, rose, blue, smoke grey or grey/brown.

The striking metal wraparound sunglasses were worn by Bono on U2's Vertigo World Tour. The Red sunglasses will be available beginning in April and can be pre-ordered by e-mail at emporioarmanired@giorgioarmani.it.

The complete Emporio Armani Red collection will be presented later this year.

"We are now the only diagnostic device company with access to the two leading technologies for diagnostic imaging: confocal scanning laser ophthalmoscopy and optical coherence tomography," said Gerhard Zinser, Ph.D., managing director and head of research and development at Heidelberg Engineering. "Having access to both technologies enables us

to select the right technology for the right application. For example, OCT has not been as well-suited to glaucoma analysis, especially for measuring progression, due to the difficulties with OCT image alignment. We are already working on new products that combine the strengths of each technology."

www.heidelbergengineering.com.

March

SOUTHWEST COUNCIL OF OPTOMETRY
Educational Conference and Exposition
March 10-12, 2006
Hotel Intercontinental - Dallas,
Niki Bedell
713/ 743-1856
713/ 743-6541
swco@optometry.uh.edu
www.swco.org

OEP CLINICAL CURRICULUM
TBI/ABI
March 18-20, 2006
Baltimore, MD
Theresa Krejci
800/447 0370
www.babousa.org.

NOVA SCOTIA
ASSOCIATION OF
OPTOMETRISTS 2006 ACE
SYMPOSIUM, March 24 - 26,
2006, World Trade &
Convention Centre (WTCC)
Halifax, NS
(902) 499-0909
wendy@innovativeplanning.ca

NEW JERSEY ACADEMY OF
OPTOMETRY
2006 GOLF CONFERENCE
March 22-25, 2006
Hilton Embassy Suites at
Kingston Plantation,
Myrtle Beach, SC
Dennis H. Lyons, O.D.
732/920-0110
DHI2020@aol.com

15TH ANNUAL NEURO-
OPTOMETRIC
REHABILITATION
ASSOCIATION (NORA)
CONFERENCE
March 22-26, 2006
Tucson, AZ
866-22-3887
rwill23@hotmail.com

NATIONAL CORNEA AND
ANTERIOR SEGMENT
SYMPOSIUM EAST, Arlington,
VA, March 25-26, 2006. 877-
825-2020, info@neconfer-
ences.com, or www.neconfer-
ences.com.

ASPEN-SNOWMASS VISION
RETREAT 20TH ANNUAL
SPRING BREAK MEETING
March 26 - 28, Timberline
Lodge, Upper Snowmass
Village, CO 314-351-3499
eyeski@integrity.com
www.eyeski.com

INTERNATIONAL VISION
EXPO EAST
March 30-April 2, 2006
New York, NY
Hotel & travel 800/ 388-8106
or 312/ 527-7300
www.visionexpoeast.com

PENNSYLVANIA OPTOMETRIC
ASSOCIATION, INC.
Curriculum for Professional
Development II
March 26, 2006
Wyndham Hotel, Harrisburg,
Ilene K. Sauertieg
717/233-6455
ilene@poaeyes.org

April

NEBRASKA OPTOMETRIC
ASSOCIATION
NOA Spring Convention
April 1-2, 2006
Omaha Embassy Suites
Omaha, NE
402/474-7716

NEW HAMPSHIRE
OPTOMETRIC ASSOCIATION
SPRING MEETING
April 2, 2006
Grappone Conference Center,
Concord, New Hampshire
Brian Klinger, O.D.
466 Washington Road
Rye, NH 03870
603/964-2885
FAX: 603/964-2886
optometrist@comcast.net

BINOCULAR VISION AND
PEDIATRICS FORUM 2006,
April 6,
CHILDREN'S LEARNING
FORUM 2007, April 7
Holiday Inn on the Lane,
Columbus, OH, Contact: Dr.
Marjean Taylor Kulp, The OSU
College of Optometry, 614-
688-3336
Fax: 614-247-6907
kulp.6@osu.edu,
http://optometry.osu.edu

AOA SPRING PLANNING
CONFERENCE
April 19-23, 2006
St. Louis, MO
www.aoa.org

ARKANSAS OPTOMETRIC
ASSOCIATION
April 20-23, Hot Springs
Jennifer Martinez, 501-661-
7675 501-372-0233 fax
aropt@swbell.net
www.arkansasoptometric.org

UNIVERSITY OF CALIFORNIA,
BERKELEY MORGAN
SYMPOSIUM/SARVER SERIES
April 21-23, 2006
Doubletree Hotel, Berkeley
800/827-2163
www.optometry.berkeley.edu

For more meetings
information, visit www.AOANews.org.

**To submit an item,
send a note to
EventCalendar@aoa.org**

5TH INTERNATIONAL
CONGRESS OF BEHAVIORAL
OPTOMETRY, April 21-24,
2006 Sydney, Australia. Visit
www.icbo2006.com for full
details and registration infor-
mation. Co-sponsored by the
Optometric Extension Program,
the Australasian College of
Behavioural Optometry and
the Societe d'Optometrie
Europa.

SOUTHERN COLLEGE OF
OPTOMETRY
SPRING CONTINUING
EDUCATION WEEKEND
April 22-23, 2006
SCO campus, Memphis,
Tennessee
800/238-0180, ext. 4
ce@sco.edu
www.sco.edu

SJOGREN'S SYNDROME
FOUNDATION
IXth International Symposium
on Sjögren's syndrome
April 27-29, 2006
Bethesda, MD
301-718-0300
www.ISSOnline.org

WEST FLORIDA OPTOMETRIC
ASSOCIATION
Spring Break Seminar
April 28-30, 2006
Sandestin Beach Hilton Resort
Dr. Wanda Batson
860/683-0221

EASTERN STATES
OPTOMETRIC CONGRESS
April 30-May 1, 2006
Mohonk Mountain House,
New Paltz, NY
Stuart Rothman, O.D.
973/992-0998
FAX: 973/992-8961
smrod@aol.com

May

AOA CONGRESSIONAL
CONFERENCE
May 1-3, 2006
Washington, DC
www.aoa.org

ARIZONA OPTOMETRIC
ASSOCIATION
Annual Congress
May 4-7, 2006
Hilton El Conquistador Resort
Tucson, AZ
602/279-0055
FAX: 602/264-6356
info@azoa

VIRGINIA OPTOMETRIC
ASSOCIATION
VOYAGES IN VISION
May 4-7, 2006
Marriott Grand Cayman Beach
Resort, Grand Cayman Island
804/643-0309
voaeyedocs@aol.com

NEW ENGLAND
PROFESSIONAL
CONFERENCES, INC.
SPRING OPTOMETRIC
SEMINAR, May 7, 2006
Tarrytown, NY, Janet Swartz
877/825-2020
FAX: 987/470-4520
info@neconferences.com
www.neconferences.com

FLORIDA OPTOMETRIC
ASSOCIATION
NSU/FOA Cruise
Enchantment of the Seas
May 13-18, 2006
Grand Cayman and Ocho
Rios, Jamaica
800/805-7245
www.funseas.com/nsu

MIDWEST VISION
CONGRESS & EXPO 2006
May 11-14, 2006
Donald Stephens Convention
Center Rosemont, IL
www.midwestvisioncongress.com

PINELLAS OPTOMETRIC
ASSOCIATION
SUNCOAST SEMINAR
May 13-14, 2006
Philip G. Currey, O.D.
727/442-5504
ldoc1@aol.com

MONTANA OPTOMETRIC
ASSOCIATION 2006
ANNUAL CONFERENCE &
EXPOSITION
May 17-20, 2006
Holiday Inn Grand Montana,
Billings, MT
Sue A. Weingartner,
406-443-1160
suew@mteyes.com

10TH ANNUAL CLINICAL EYE
CARE CONFERENCE &
ALUMNI WEEKEND, Nova
Southeastern University
College of Optometry, May
19-21, 2006
Fort Lauderdale, Shakara
Rosenbaum, MS 954/262-
4224, ocoe@nsu.nova.edu
http://optometry.nova.edu/ce

see Meetings, next page

A child's drawing of a red airplane flying over a yellow runway. The sky is blue, and the ground is green. There are some small, simple drawings of trees and a building in the background.

OPTOMETRIC EXTENSION
PROGRAM FOUNDATION
European Kraskin Invitational
Skeffington Symposium
May 20-22, 2006
Denmark

ILLINOIS OPTOMETRIC
ASSOCIATION, CHICAGO
NORTHSIDE OPTOMETRIC
SOCIETY, ADVANCED
EYECARE ASSOCIATES
AEA Cruise Seminars – Iberian
Interlude
May 27-June 3, 2006
Sea Princess
Dr. Mark Rosanova, President
888/638-6009
aeacruises.aol.com
www.optometriccruisesemi-
nars.com

UTAH OPTOMETRIC
ASSOCIATION
ANNUAL CONVENTION
June 1-4, 2006
The Canyons Resort
Park City, Utah
Clive E. Watson
801-364-9103
uoa@xmission.com
www.utaheyedoc.org

OPTOMETRY ASSOCIATION
OF LOUISIANA
ANNUAL CONVENTION
June 9-11, 2006
The Lafayette Hilton & Towers,
Dr. James D. Sandefur or
Amanda Perry
888/388-0675
318/335-0675
optla@bellsouth.net
www.optla.org

VIRGINIA OPTOMETRIC
ASSOCIATION
2006 VOA ANNUAL
CONVENTION & MIDDLE
ATLANTIC CONT.
EDUCATION CONFERENCE
June 9-11, 2006
Norfolk Waterside Marriott,
Norfolk, VA
804/643-0309
voaeyedocs@aol.com

PENNSYLVANIA OPTOMETRIC
ASSOCIATION, INC.
POA SPRING EDUCATIONAL
CONFERENCE
June 10-11, 2006
Hershey Lodge and
Convention Center
Ilene K. Sauertieg
717/233-6455
Ilene@poaeyes.org

THE 109TH ANNUAL AOA
CONGRESS & 36TH ANNUAL
AOA CONFERENCE:
OPTOMETRY'S MEETING™
June 21-25, 2006
Las Vegas, Nevada Mandalay
Bay Resort & Casino.
www.optometrysmeeting.org

AEA CRUISE SEMINARS –
Gulf of Alaska
July 1-8, 2006
Sapphire Princess
Dr. Mark Rosanova,
888/638-6009
aeacruises.aol.com
www.optometriccruisesemi-
nars.com

NATIONAL OPTOMETRIC
ASSOCIATION
38TH CONVENTION OF THE
NATIONAL OPTOMETRIC
ASSOCIATION
July 11-16, 2006
Cancun Beach & Golf Resort,
877/394-2020
FAX: 219/398-1077
ccomer2@aol.com
www.natoptassoc.org

FLORIDA OPTOMETRIC
ASSOCIATION
2006 FOA ANNUAL
CONVENTION
July 13-16, 2006
Marco Island Marriott, Marco
Island, Florida
Kellie Webb
800/399-2334
kellie@floridaeyes.org

NATIONAL GLAUCOMA
SYMPOSIUM WEST, Newport
Beach, CA. July 15-16, 2006.
877-825-2020, [info@neconfer-](mailto:info@neconferences.com)
[ences.com](http://www.neconferences.com), or [ences.com](http://www.neconfer-
<a href=).

AEA CRUISE SEMINARS –
Scandinavia
July 15-22, 2006
Sea Princess
Dr. Mark Rosanova
888/638-6009
aeacruises.aol.com
www.optometriccruisesemi-
nars.com

NORTHERN ROCKIES
OPTOMETRIC CONFERENCE,
July 20-22, 2006 Snow King
Conference Center, Jackson,
WY, www.NROCMMeeting.com
307/637-7575
Contact: Dan Lex

AEA CRUISE SEMINARS –
Grand Mediterranean
July 27-August 8, 2006
Grand Princess
Dr. Mark Rosanova, President
888/638-6009
aeacruises.aol.com
www.optometriccruisesemi-
nars.com

ALABAMA OPTOMETRIC
ASSOCIATION
GULF COAST SUMMER
CONFERENCE
July 28-29, 2006
Hilton Sandestin Beach Golf
Resort & Spa
334/ 834-1057
lori@alaopt.com
www.alaopt.org

SOUTHWEST FLORIDA
OPTOMETRIC ASSOCIATION,
EDUCATIONAL RETREAT 2006
August 5-6, Southseas Island

Resort, Sanibel, Florida
Dr. Brad Middaugh
239/481-7799
FAX: 239/481-3739
swfoa@att.net
www.genesisqt.com/swfoa

SUMMIT 3 –
OPTOMETRY 2020
August 10-13, 2006
Hyatt Regency DFW
Dallas, TX
www.aao.org

[illegible]

Showcase

classified

"The" Coding Tool For Your Optometric Practice

Updated with 100's of code changes

Codes For Optometry 2006 is an extensive listing of the codes that you need to make sure that your Medicare and third-party insurance claims are submitted properly. It is an invaluable aid for you and your staff in identifying diagnosis, procedure, material codes and speeding up administrative procedures. The 8 1/2" x 11" perfect bound book is divided into four sections with both alphabetical and numeric listings for easy use.

- Procedural Codes, Physician's Current Procedural Terminology (CPT 2006)
- Diagnosis Codes, International Classifications of Disease 9th Edition Clinical Modification (ICD-9-CM)
- Material Codes, Health Care Financing Administration's Health Care Procedural Coding System (HCPCS)
- Medicare's National Correct Coding Initiative (NCCI) Edits

Codes For Optometry also includes both the 1995 and 1997 Documentation Guidelines For Evaluation and Management Services.

CPT® 2006 Standard A.M.A. a \$62.95 value

Easy to use, easy to read. The 2006 edition of the AMA's Current Procedural Terminology (CPT®) official coding reference contains all CPT codes, modifiers and guidelines for 2005. Our book is the only one in the market with official CPT coding rules and guidelines developed by the CPT Editorial Panel and used to define items that are necessary to appropriately interpret and report medical procedures and services.

The Standard Edition features an efficient two-column format and an extensive index to help locate codes by procedure, service, organ, condition, eponym and synonym, and abbreviations.

CODES

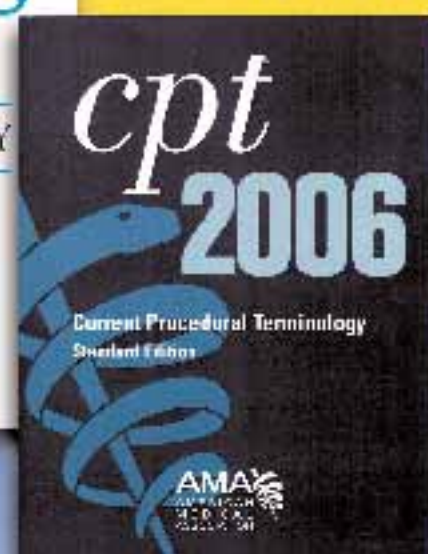
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2006



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TOTAL		

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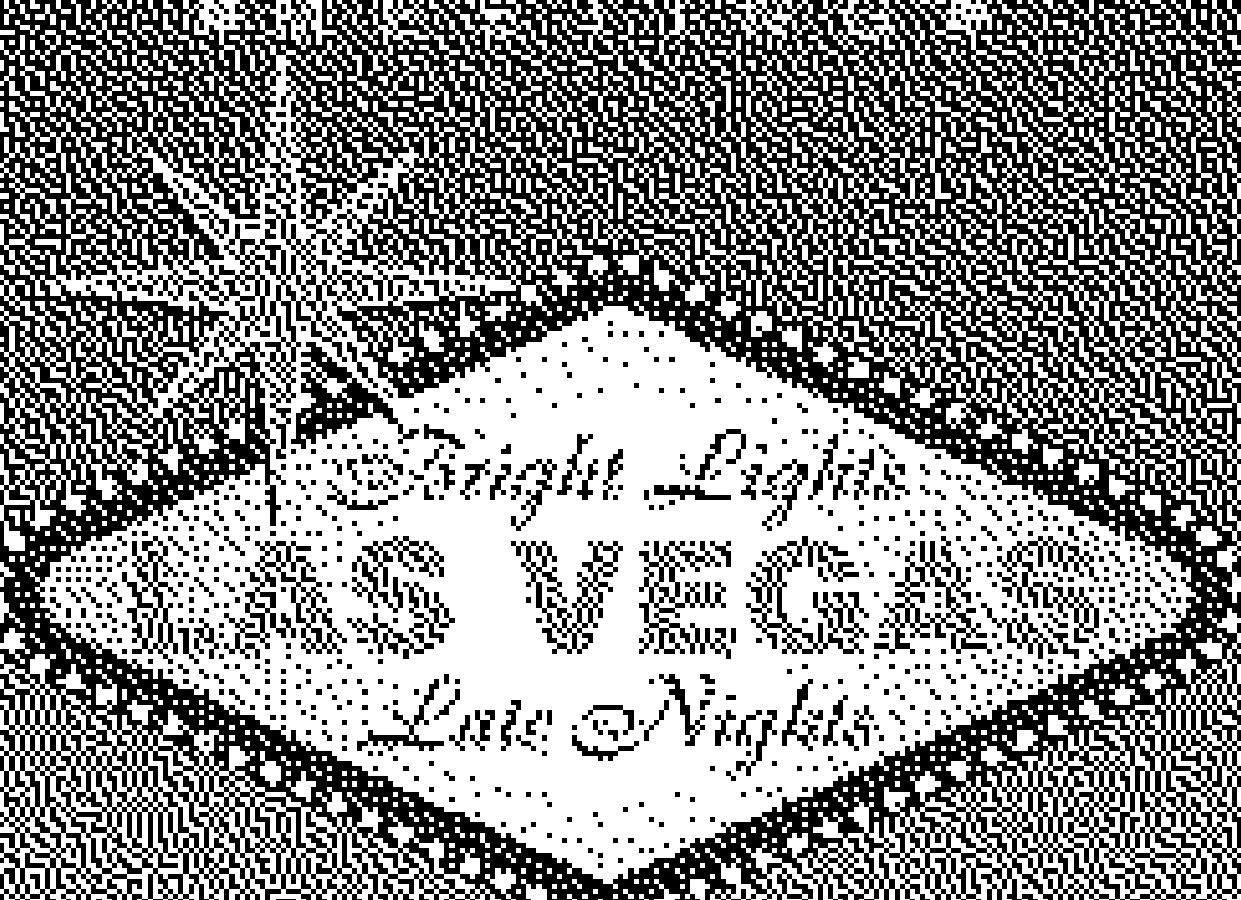
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2006 AIAA CONGRESS & EXHIBIT



2006 AIAA CONGRESS & EXHIBIT

The 44th Annual AIAA Congress & Exhibit, 2006, will be held at the Flamingo Las Vegas, Nevada, from June 21-25, 2006. The event will feature a variety of activities, including technical sessions, exhibits, and social events. The Flamingo Las Vegas is a premier destination for conferences and events, offering a world-class venue and exceptional service. The event will be held at the Flamingo Las Vegas, which is located in the heart of Las Vegas. The Flamingo Las Vegas is a world-class venue for conferences and events, offering a variety of facilities and services. The event will be held at the Flamingo Las Vegas, which is a premier destination for conferences and events. The event will be held at the Flamingo Las Vegas, which is a world-class venue for conferences and events.

June 21-25, 2006 **June 22-24, 2006**

Flamingo Las Vegas, Las Vegas, NV

2006 AIAA CONGRESS & EXHIBIT
 June 21-25, 2006
 June 22-24, 2006
 Flamingo Las Vegas, Las Vegas, NV
 AIAA
 American Institute of Aeronautics and Astronautics
 1801 Alexander Bell Drive
 Reston, VA 20191-4398
 Tel: 703/295-6000
 Fax: 703/295-6001
 Email: congress@aiaa.org
 Website: www.aiaa.org/congress